

EL Read
Paralegal Specialist

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO 08-703718	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	1		1				51	1
2		1		1			52	10
3		1		1			53	1
4		1		1			54	1
5		4		4			55	1
6		0		0			56	0
7		0		0			57	0
8	1		1				58	0
9		1		1			59	3
10		1		1			60	
11		1		1			61	
12		1		1			62	
13		1		1			63	
14		6		6			64	
15	1		1				65	
16	1		1				66	
17		2		2			67	
18	1		1				68	
19	1		1				69	
20		0		0			70	
21	1		1				71	
22	1		1				72	
23	1		1				73	
24		3		3			74	
25		3		3			75	
26		3		3			76	
27		0		0			77	
28		0		0			78	
29		3		3			79	
30	1		1				80	
31		1		1			81	
32		1		1			82	
33		2		2			83	
34		2		2			84	
35		2		2			85	
36		2		2			86	
37		2		2			87	
38		2		2			88	
39	1		1				89	
40		1		1			90	
41		1		1			91	
42	1		1				92	
43		1		1			93	
44		1		1			94	
45		1		1			95	
46		1		1			96	
47		1		1			97	
48		1		1			98	
49		1		1			99	
50		1		1			100	
TOTAL IND.	15		15				TOTAL IND.	
TOTAL DEP.		78		78			TOTAL DEP.	
TOTAL CLAIMS	59		93				TOTAL CLAIMS	

72

CLAIMS ONLY

SERIAL NO

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101		1				
102		1				
103		1				
104		1				
105		1				
106		1				
107		1				
108		1				
109		1				
110		1				
111		4				
112	1					
113	1					
114	1					
115		3				
116		3				
117		3				
118		1				
119		1				
120		1				
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TOTAL IND.	3					
TOTAL DEP.	34					
TOTAL CLAIMS	34					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS